



<b>CHANGE OF CORRESPONDENCE ADDRESS Application</b>  Address to: Commissioner for Patents P. O. Box 1450 Alexandria, VA 22313-1450	Application Number	10/643,563
	Filing Date	August 18, 2003
	First Named Inventor	Wei Li, Jiansheng Huang
	Art Unit	2183
	Examiner Name	Unknown
	Attorney Docket No.	50277-2249

Please change the Correspondence Address for the above-identified application to:

<input checked="" type="checkbox"/>	The address associated with Customer Number:	42425
OR		

<input type="checkbox"/> Firm or Individual Name					
Address					
City		State		Zip	
Country					
Telephone				Fax	

This form cannot be used to change the data associated with a Customer Number. To change the data associated with an existing Customer Number use "Request for Customer Number Data Change" (PTO/SB/124).

I am the:

<input type="checkbox"/>	Applicant/Inventor
<input type="checkbox"/>	Assignee of record of the entire interest. Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96).
<input checked="" type="checkbox"/>	Attorney or Agent of record. Registration Number <u>35,894</u>
<input type="checkbox"/>	Registered practitioner named in the application transmittal letter in an application without an executed oath or declaration. See 37 CFR 1.33(a)(1). Registration Number _____

Typed or Printed Name	Brian D. Hickman		
Signature			
Date	February <u>9</u> , 2006	Telephone	(408) 414-1080
NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.			

<input checked="" type="checkbox"/>	*Total of <u>1</u> forms are submitted.
-------------------------------------	---